



Appl. No. 10/654,668  
Reply Dated February 22, 2007  
Reply to Office Action Mailed December 7, 2006

Express Mailing Label No.:  
EV 929476833 US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No.: 10/654,668 Confirmation No.: 5368  
Applicant: Brian A. Rosenfeld, M.D. and Michael Breslow, M.D.  
Filed: September 4, 2003  
Group Art Unit: 3626  
Examiner: MORGAN, Robert W.  
Docket No.: 2483-001CIP1

MAIL STOP AF  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

**INTERVIEW SUMMARY PURSUANT TO 37 C.F.R. § 1.133**

Dear Sir:

On February 21, 2007, a telephonic interview was conducted in which Examiner Robert Morgan participated for the Patent and Trademark Office and Jon Roberts participated for Applicant. A proposed amendment after final rejection was discussed, which Applicant's attorney agreed to submit as soon as possible. Agreement on claims was not reached.

Respectfully Submitted,

Jon L. Roberts, Ph.D., J.D.  
Registration No. 31,293  
Elliott D. Light, Esq.  
Registration No. 51,948  
Roberts Mardula & Wertheim, LLC  
11800 Sunrise Valley Drive, Suite 1000  
Reston, VA 20191  
(703) 391-2900

02-23-07

APR 2007

Appl. No. 10/654,668

Reply Dated February 22, 2007

Reply to Office Action Mailed December 7, 2006

Express Mailing Label No.:  
EV 929476833 US



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No.: 10/654,668 Confirmation No.: 5368  
Applicant: Brian A. Rosenfeld, M.D. and Michael Breslow, M.D.  
Filed: September 4, 2003  
Group Art Unit: 3626  
Examiner: MORGAN, Robert W.  
Docket No.: 2483-001CIP1

**TRANSMITTAL LETTER**

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed please find:

1. An Amendment responsive to the Office Action mailed December 7, 2006;
2. Five Terminal Disclaimers; and
3. A check in the amount of \$325.00 in payment of the terminal disclaimer fees.

The Director of the U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, and conversely credit any overpayment to Deposit Account No. 18-1579. A duplicate copy of this letter is enclosed.

Respectfully submitted,

Jon L. Roberts, Ph.D., J.D.  
Registration No. 31,293  
Elliott D. Light, J.D.  
Registration No. 51,948  
Roberts Mardula & Wertheim, LLC  
11800 Sunrise Valley Drive, Suite 1000  
Reston, VA 20191-5302  
(703) 391-2900

FEB 22 2007

IAPS1

FEB 22 2007

IAPS1

Effective on 10/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEET TRANSMITTAL

## For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)325.00

### Complete if Known

Application Number	10/654,668
Filing Date	09/04/2003
First Named Inventor	Brian A. Rosenfeld, M.D.
Examiner Name	Robert W. Morgan
Art Unit	3626
Attorney Docket No.	2483-001CIP1

### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Small Entity Fee (\$)
- 20 or HP =	x	=		50	25

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

#### 4. OTHER FEE(S)

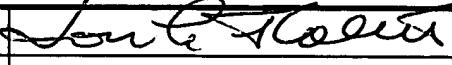
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimers (5)

Fees Paid (\$)

\$325.00

### SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 31,293	Telephone (703) 391-2900
Name (Print/Type)	Jon L. Roberts, Ph.D., J.D.		Date February 22, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.